

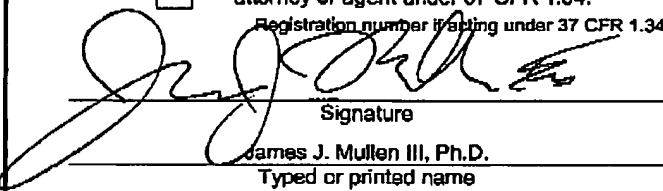
DEC 20 2005

PTO/SB/22 (12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 511582002800	
Application Number 09/942,052		Filed August 28, 2001	
For NUCLEIC ACID AND CORRESPONDING PROTEIN ENTITLED 85P1B3 USEFUL IN TREATMENT AND DETECTION OF CANCER			
Art Unit 1643		Examiner D. Blanchard	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$120	Small Entity Fee \$60 \$
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 \$
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510 \$ 510.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080 \$
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.		
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input type="checkbox"/>	attorney or agent of record. Registration Number _____	
	<input checked="" type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if existing under 37 CFR 1.34 <u>44,957</u>	
	Signature 		Date December 20, 2005
	James J. Mullen III, Ph.D. Typed or printed name		(858) 720-7940 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.			
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.		

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